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REGISTERED AGENT CHANGE

BROCK DESIGN GROUP, INC.

Certificate of Status	0
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6/21/2005

JUN-22-2005 13:21 P.02
STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	_	617.0502, 607.1508, or 617.1508, Florida Statutes, on organized under the laws of the State of Georgie		
in orde	er to change its re <mark>gistere</mark> d office	or registered agent, or both, in the State of Florida.		
1. The name of	the corporation: Brock Design G	roup, Inc.		
		ree Road, Ste 100, Suwanee, GA 30024		
3. The mailing	address (if different):			
4. Date of incor	poration/qualification: 9/1/1999	Document number: F99000004546		
	d street address of the current reg rtment of State:	ristered agent and registered office on file with the		
	Corporation Service Company			
	1201 Hays Street	LLAH	05 JU	-17
	Tallahassee, FL 32301	TASS	JUN 22	=
6. The name and street address of the new registered agent (if changed):		cred agent (if changed) and /or registered office	AM 9:	ED.
	Business Filings Incorporated	TATE ORID.	£3	
	1203 Governors Square Blvd.	عر Suite 101		
(P.O. Box NOT acceptable)				
	Tallahassee, FL 32301			
The street addr	ess of its registered office and the identical.	he street address of the business office of its regist	ered a	gent,
Such change wauthorized by t	as authorized by resolution duly he board, or the corporation has	y adopted by its board of directors or by an officer speen notified in writing of the change.	so	
Mark S. Brock, President		Mark S. Brock, President (Printed or typed name and bite)		
I hereby accept I further agree of my duties, an document is be corporation ha	t the appointment as registered to comply with the provisions of all am familiar with and accepting filed merely to reflect a chass been notified in writing of this	agent and agree to act in this capacity, fall statutes relative to the proper and complete p t the obligation of my position as registered agent, nge in the registered office address, I hereby confi- s change.	erforn Or, rm tha	rance if this it the
	(philips of Registered Agent)	5/24/2005 (Date)		
If signing on b	half of an entity:			
Mark Schiff, AV		<u> </u>		
ſ	Typed or Printed Name)			

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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